

**LD6000030629**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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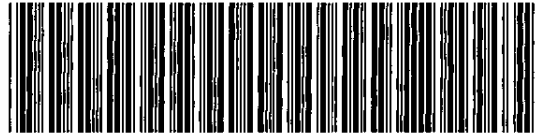
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 APR 15 AM 10:38

**T. HAMPTON**

APR 16 2008

**EXAMINER**

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SKY LOFTS OF SANTA BARBARA, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSEPH M. BALOCCO, JR., ESQ.

(Name of Person)

JOSEPH M. BALOCCO, P.A.

(Firm/Company)

1323 SE Third Avenue

(Address)

Fort Lauderdale, FL 33316

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH M. BALOCCO, JR., ESQ. at 954 764-0005

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ 30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

08 APR 15 PM 3:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

April 9, 2008

JOSEPH M BALOCCO, JR, ESQ  
1323 SE THIRD AVE  
FT LAUDERDALE, FL 33316

SUBJECT: SKY LOFTS OF SANTA BARBARA, LLC  
Ref. Number: L06000030629

We have received your document for SKY LOFTS OF SANTA BARBARA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 308A00021007

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 APR 15 AM 10:39

1. The name of a limited liability company is  
SKY LOFTS OF SANTA BARBARA, LLC

2. The Articles of Organization were filed on 3/22/2006 and assigned document number  
L06000030629

3. The date the dissolution was approved: April 8, 2008

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section  
608.441, Florida Statutes, (copy 608.441 on back cover letter).

UPON THE WRITTEN CONSENT OF ALL MEMBERS

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

WINSTON H.B., LLC, MANAGING MEMBER by ANDREA BROWN, MANAGING MEMBER

RANDALL COOPER